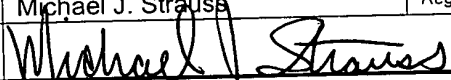



<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>436.007</b>	
		First Inventor <b>Robert Scarano, et al.</b>	
		Title <b>METHODS AND APPARATUS FOR AUDIO DATA MONITORING AND EVALUATION USING SPEECH RECOGNITION</b>	
		Express Mail Label No. _____	
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></div> <div>2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small></div> <div>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>35</b>]</span> <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul></div> <div>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>19</b>]</span></div> <div>5. Oath or Declaration <span style="float: right;">[Total Sheets <b>2</b>]</span><div>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</div><div>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><div>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></div></div></div> <div>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div>		<div>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</div> <div>8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small><div>a. <input type="checkbox"/> Computer Readable Form (CRF)</div><div>b. Specification Sequence Listing on:<div>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper</div></div><div>c. <input type="checkbox"/> Statements verifying identity of above copies</div></div>	
		<b>ACCOMPANYING APPLICATION PARTS</b>	
		<div>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</div> <div>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></div> <div>11. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div> <div>13. <input type="checkbox"/> Preliminary Amendment</div> <div>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></div> <div>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></div> <div>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small></div> <div>17. <input type="checkbox"/> Other: _____</div>	
<div>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <b>60/419,737</b> <div>Prior application information: Examiner <b>Not Yet Assigned</b> Art Unit: <b>N/A</b></div></div> <div><b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</div>			
<b>19. CORRESPONDENCE ADDRESS</b>			
<div><input type="checkbox"/> Customer Number: _____ OR <input checked="" type="checkbox"/> Correspondence address below</div>			
Name		<b>FULBRIGHT &amp; JAWORSKI L.L.P. Michael J. Strauss</b>	
Address		<b>801 Pennsylvania Avenue, N.W.</b>	
City	Washington	State	DC
Country	US	Telephone	(202) 662-0200
		Zip Code	20004-2623
		Fax	(202) 662-4643
Name (Print/Type)		Registration No. (Attorney/Agent)	
<b>Michael J. Strauss</b>		<b>32,443</b>	
Signature		Date	
		<b>October 20, 2003</b>	

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10/687702



FEE TRANSMITTAL for FY 2004				Complete if Known																																																																																																																																																																																					
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<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">06-2375</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Fulbright &amp; Jaworski L.L.P.</span> The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				3. ADDITIONAL FEES																																																																																																																																																																																					
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